# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 1 of 56

Fill in this information to identify yo	urcase:
United States Bankruptcy Court for the	3:
Northern District of Illinois	
Case number (# known):	Chapter you are filing under:  Chapter 7  Chapter 11  Chapter 12  Khapter 13
	The base has been been been been been been been bee

UNITED STATES BANKAUPTCY COURT
NORTHERN DISTRICT OF HUMBUR

JUL 132018

JEFFREY P. ALLS Check if this is an INTAKENDAD AMERICAN

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	alti (E Identify Yourself		
	V	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Trisshauna	
	identification (for example,	First name	First name
	your driver's license or	Kenisha	
	passport).	Middle name	Middle name
	Bring your picture	Daniels	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8	First neme	
	years	1 not heart	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
******* <b>3</b> .	Only the last 4 digits of		
	your Social Security	xxx - xx <u>5</u> <u>0</u> <u>7</u> <u>6</u>	xxx - xx -
	number or federal	An a	OR
Individual Taxpayer Identification number (ITIN)		9 xx - xx	9 xx - xx

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 2 of 56

Debtor 1	Trisshauna First Name Middle	K. Danie	els	Case number (if known)	
	१८६४ म् म्यापान् राज्योत्याना प्रत्योत्याना १ वर्गाकारतान् वतः स्वयोत्योत्याम्बार्यात्रे प्रस्ति १८८५ <b>म्यापान्त्रोत्य</b>	About Debtor 1;	na finitario no control y recordo de descolucido en porto en proceso de control de contr		
		About Debtor 1.		About Debtor 2 (Spouse Only in a Joint Cas	e):
and E	ousiness names Employer ification Numbers you have used in	I have not used a	ny business names or EINs.	☐ I have not used any business names or EIN	ls.
	e trade names and	Business name		Business name	
	business as names	Business name		Business name	******
		EIN		EIN	
		EIN		EIN	
5. Where	e you live	n die de Alle Berton der Grenne der Berton der Stellender der Berton der Greine der Greine der Berton der Bert	ilikeelikkeide on 1958 killista poole tiilista erive eels ta assassaansa egileksis egipte yassa kan saassa saa	If Debtor 2 lives at a different address:	Novalle Alice 4-4-4
		7251 South Shore	e Drive		
		Number Street		Number Street	
		Apt. 17F			
		Chicago	IL 60649		
		City	State ZIP Code	City State ZIP	Code
		Cook	The second secon		
		County		County	
		If your mailing addre above, fill it in here. I any notices to you at t	ss is different from the one Note that the court will send his mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will sen any notices to this mailing address.	n d
		Number Street		Number Street	
		P.O. Box		P.O. Box	
		City	State ZIP Code	City State ZIP (	Code
Why y	ou are choosing	Check one;		Check one:	Vel-Viriedianani.
	this district to file for bankruptcy	Over the last 180 d I have lived in this o other district.	ays before filing this petition, district longer than in any	Over the last 180 days before filing this petition. I have lived in this district longer than in any other district.	on,
		I have another reas (See 28 U.S.C. § 1-		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	
		WAR-And Add Add Add And And And And And And			

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 3 of 56

Debtor 1	Trisshauna I	<b>≺.</b> ame	Da Last Nan	aniels		Case number (#	known)	
art 2:	Tell the Court Abo	ut Your i	Bankru	ptcy Case				
Bank	hapter of the ruptcy Code you	Check of the Check	one. (Fo kruptcy (	r a brief description of each (Form 2010)). Also, go to th	, see Not e top of p	lice Required by 1 page 1 and check t	1 <i>U.S.C.</i> § 34 he appropria	2(b) for Individuals Filing te box.
are cl unde	hoosing to file	☐ Cha						
41.00		☐ Cha	apter 11					
		☐ Cha	pter 12	2				
	en i i ining specification (in in i	🖸 Cha	apter 13	3				
. Howy	you will pay the fee	loca you sub	al court rself, yo mitting	he entire fee when I file for more details about he ou may pay with cash, ca your payment on your be printed address.	ow you r ashier's	nay pay. Typical check, or money	ly, if you an order, If yo	e paying the fee ur attorney is
		☑ I ne App	ed to p	ay the fee in installment for Individuals to Pay TI	nts. If yo	ou choose this or	otion, sign a	nd attach the
		less pay <i>Cha</i>	than 19 the fee	50% of the official pover	ty line th hoose th	at applies to you his option, you m	r family size	he Application to Have th
bankr	ou filed for option within the	□ No ☑ Ves	District	IL Northern District	When	05/11/2018		18-13906
1450	years?	<b>103</b> ,		IL Northern District		MM / DD / YYYY 03/17/2016		
					When	MM / DD / YYYY	Case number	16-09215
			District	IL Northern District	When	08/02/2017 MM / DD / YYYY	Case number	17-23052
*	,,,			Tal Tiblican adams and an analysis of the same and an anal	-11 -111-111-11 11 11 11 11 11 11 11			Harristenstrate transcriberra constraints and the second
	ny bankruptcy pending or being	No No						
	y a spouse who is ing this case with	☐ Yes.						о уои
you, o	r by a business r, or by an		District		When	MM/DD/YYYY	Case number	, if known
	•		Debtor				Relationship t	о уон
					When	MM / DD / YYYY	Case number	if known
Do you	ı rent your	CJ No.	Go to li	ne 12. ur landlord obtained an evic				The second section was an experience of the second second section second
				Go lo line 12.				

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 4 of 56

Debtor 1 Trisshauna First Name Middle Na		niels	Case number (# 6	nown)		
B	<b>B</b> b					
Report About Any	Businesses You	Own as a Sole Proprie	tor			
2. Are you a sole proprietor of any full- or part-time	🛭 No. Go to Par	t 4.				
business?	🔲 Yes. Name ar	nd location of business				
A sole proprietorship is a business you operate as an						
individual, and is not a separate legal entity such as	Name of b	ousiness, if any	THE PARTY OF THE P		P. A.P. Call. Like the control of th	
a corporation, partnership, or LLC.	Number	Street				
If you have more than one sole proprietorship, use a						
separate sheet and attach it						
to this petition.	City		State	ZIP Code		
	Check th	e appropriate box to describ	ne vour husiness:			
		h Care Business (as defined		i		
		e Asset Real Estate (as defi				
		Stockbroker (as defined in 11 U.S.C. § 101(53A))				
		Commodity Broker (as defined in 11 U.S.C. § 101(6))				
		of the above	<b>V</b> V,			
Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	No. I am filing the Bankr	ce sheet, statement of oper, ments do not exist, follow th illing under Chapter 11, but I am uptcy Code.  under Chapter 11 and I am by Code.	e procedure in 11 U.S.C. §  NOT a small business de	§ 1116(1)(B).	the definition in	
ari 45% Report if You Own	,	ardous Property or Any	Property That Needs	s Immediate A	Attention	
Do you own or have any	☑ No					
property that poses or is alleged to pose a threat	☐ Yes. What is t	the hazard?				
of imminent and						
identifiable hazard to public health or safety?						
Or do you own any property that needs						
immediate attention?	If immed	iate attention is needed, why	y is it needed?	THE PARTY NATURAL		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				· · · · · · · · · · · · · · · · · · ·		
	Where is	the property?			· · · · · · · · · · · · · · · · · · ·	
		Number	Street			
		****				
		City	**************************************	State	ZIP Code	

#### Entered 07/13/18 11:54:01 Case 18-19646 Doc 1 Filed 07/13/18 Desc Main Page 5 of 56 Document

Debtor 1

Trisshauna

Cara	number	e 54 1		
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38.0	<b>*</b>	180	
	744	- 10	73
841. e		i 32~	- 13
25.33		N 22	<b>₩148</b>

## Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:	
-----------------	--

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so. Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition. you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

### I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 6 of 56

		Case number (if	known)
A			
Answer These Que	stions for Reporting Purpo	oses	
rind of debts do ve?	16a. <b>Are your debts prim</b> as "incurred by an individ	a <b>rily consumer debts?</b> Consumer de lual primarily for a personal, family, cr ho	ebts are defined in 11 U.S.C. § 101(8) usehold purpose."
	No. Go to line 16b.  Yes. Go to line 17.		
	16b. <b>Are your debts prima</b> money for a business or i	arily business debts? Business debt investment or through the operation of th	s are debts that you incurred to obtain e business or investment.
	<ul><li>☑ No. Go to line 16c.</li><li>☑ Yes. Go to line 17.</li></ul>		
	16c. State the type of debts yo	ou owe that are not consumer debts or bu	usiness debts.
J filing under r 7?	☑ No. I am not filing under C	Chapter 7. Go to line 18.	en maken kenara da kan
estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors?	☐ Yes. I am filing under Char administrative expens ☐ No ☐ Yes	oter 7. Do you estimate that after any exe les are paid that funds will be available to	mpt property is excluded and ordistribute to unsecured creditors?
any creditors do imate that you ຂອງກວານກະ	☑ 1-49 □ 50-99 □ 100-199	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
and it is a state of the security of the control of the security of the state of the security of the security of	200-999		
ich do you e your assets to h?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion
ch do von	makes hourselford, subject (2017 programmer hourselford, by makely see according to a subject of programmer over the programmer of the contract of the contrac	An experience of the second contract of the s	$-\frac{1}{2}\left(\frac{1}{2}\right)\right)\right)}{\frac{1}{2}\right)}\right)}{\frac{1}{2}}\right)}\right)}\right)}\right)}\right)}\right)}\right)}\right)}\right)}\right)}\right)}}$
your liabilities	<b>D</b> \$50,001-\$100,000		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion
		☐ \$50,000,001-\$100 million	☐ \$10,000,000,001-\$50 billion
ign Below	■ \$500,001-\$1 million	<b>L</b> \$100,000,001-\$500 million	☐ More than \$50 billion
	I have examined this petition, ar correct.	nd I declare under penalty of perjury that	the information provided is true and
	If I have chosen to file under Ch of title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may proceed, understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed
	this document, I have obtained a	and read the notice required by 11 U.S.C	. § 342(b).
	I understand making false stat with a bankruptey case can resu	ement, concealing property, or obtaining	money or property by fraud in connection
	* CV	*	
	Signature of Debtor 1	Signature	of Debtor 2
	Executed on NM / D0 /Y	Executed	on
	Answer These Que  ind of debts do  ve?  iffling under r 7?  estimate that after impt property is ed and strative expenses if that funds will be le for distribution cured creditors?  into the form of	Answer These Questions for Reporting Purpolition of debts do ve?  16a. Are your debts primas "incurred by an individence of the primas as "incurred by an individence of the primas of t	Answer These Questions for Reporting Purposes  ind of debts do ve?  16a. Are your debts primarily consumer debts? Consumer of as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by an individual primarily for a personal, family, or he as "incurred by a personal, family, or he as "incurred better throught in property, or obtaining with a better primary and sonal set on personal family and sonal set on personal family and sonal family and sonal family and sonal family and

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 7 of 56

	First Name Middle Nam	Last Nanse	Case number (if known)		
For your attorney, if you are represented by one  if you are not represented by an attorney, you do not		I, the attorney for the debtor(s) named in this to proceed under Chapter 7, 11, 12, or 13 of available under each chapter for which the pethe notice required by 11 U.S.C. § 342(b) and knowledge after an inquiry that the information	litle 11, United States Code, a erson is eligible. Lalso certify i Lin a case in which 6 7077bW	nd have e hat I have 1)(D) appl	explained the relief  delivered to the debtor(s  des. certify that I have no
need to fi	le this page.	×	<b></b>		
		Signature of Attorney for Debtor	Date		
		Signature of Attorney for Deptor		MM /	DD /YYYY
		Printed name			WALLES AND
		Firm name			
		Number Street		** Tropylot.ac.	
		City			
		City	State	ZIP Code	
		Contact phone	Email address		
		Bar number	State	-	

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 8 of 56

Debtor 1	Trisshauna K.	Daniels Last Name		Case number (# known)
udinėj tičko pa Pavijaas padavi	r general and and electric least states are sent the first and the sent states of the sent states of the sent s			
bankrup attorney	if you are filing this tcy without an	should understand themselves succes	I that many people find it	ent yourself in bankruptcy court, but you t extremely difficult to represent otcy has long-term financial and legal ire a qualified attorney
an attorn	e represented by ley, you do not ile this page.	To be successful, you technical, and a mista dismissed because you hearing, or cooperate firm if your case is sel	umust correctly file and han ake or inaction may affect yo ou did not file a required doo with the court, case trustee	dle your bankruptcy case. The rules are very our rights. For example, your case may be cument, pay a fee on time, attend a meeting or , U.S. trustee, bankruptcy administrator, or audit ens, you could lose your right to file another
		court. Even if you plar in your schedules. If y property or properly cl also deny you a disch case, such as destroy cases are randomly a	n to pay a particular debt ou /ou do not list a debt, the de laim it as exempt, you may a large of all your debts if you /ing or hiding property, falsif- udited to determine if debtor	thedules that you are required to file with the tside of your bankruptcy, you must list that debt bt may not be discharged. If you do not list not be able to keep the property. The judge can do something dishonest in your bankruptcy ying records, or lying. Individual bankruptcy is have been accurate, truthful, and complete.
		hired an attorney. The successful, you must to Bankruptcy Procedure	e court will not treat you diffe be familiar with the United S	expects you to follow the rules as if you had rently because you are filing for yourself. To be tates Bankruptcy Code, the Federal Rules of court in which your case is filed. You must also ly.
		Are you aware that filin consequences?	ng for bankruptcy is a seriou	rs action with long-term financial and legal
		☐ No ☑ Yes		
		Are you aware that bar inaccurate or incomple	nkruptcy fraud is a serious c ete, you could be fined or im	crime and that if your bankruptcy forms are
		☐ No ☑ Yes	, ,	and and a
		Did you pay or agree to No Yes. Name of Perso	n	in attorney to help you fill out your bankruptcy forms?  , Declaration, and Signature (Official Form 119).
	monumer <b>J</b>	have read and understi attorney may cause me	pod this notice, and I am aw	he risks involved in filing without an attorney. I ware that filing a bankruptcy case without an ty if I do not properly handle the case.
	•	Signature of Debtor 1		Signature of Debtor 2
		Date 18 MM / DD /	8106	Date MM / DD / YYYY
		Contact phone		Contact phone
		Cell phone (312) 69		Cell phone
		Email address trisshaur	na@gmail.com	Email address

#### Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Page 9 of 56 Document

Summar	ar of Valle	Access and I	iahiiidi		E &	al Information	
Official F	Form 106S	Sum					
						amende	id filing
Case number	(If known)					Check i	
	Bankruptcy Court fo	r the: Northern District of	Illinois	*			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Lasi Mame				
Dahana	First Name	Middle Name	Last Name				
Debtor 1	Chrystal	A. Allen					

12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

## 21111 **Summarize Your Assets** Your assets DIR SECRETARION OF STREET CAME Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 900.00 1c. Copy line 63, Total of all property on Schedule A/B ..... 900.00 Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 19,124.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D............. 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 34,722.00 53,846.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) 3,443.00 Copy your combined monthly income from line 12 of Schedule I..... 5. Schedule J: Your Expenses (Official Form 106J) 3,133,00 Copy your monthly expenses from line 22c of Schedule J

if this is an

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 10 of 56

De	btor 1 Chrystal	A. Middle Nante	Allen Last Name		Case number (#)	known)		
7	ar 4: Answer The	ese Questio	ns for Administr	ative and Statistical Recon	łs			
6.	Are you filing for bar	nkruptcy unde	er Chapters 7, 11, c	r 13?				
	No. You have noth	ning to report o	n this part of the for	m. Check this box and submit this	form to the co	ourt with your other	r schedules.	
7.	What kind of debt do	you have?	nder für eine eine einem til men blacktick i timber ver eg get viggen.	ermanne pass e quitas en la companya montrolorum monumina e fan dan ta 1920 e e 47 ca en emempaga e constituent test	eliana ng milisyenferi si 1935 ti Shamar Ya Araw wan a	an ingeste di ini mpagarana na mpagari gamelal lada a kan	the State (State) is a new above the angle edge	25 millionis (2 missionis especiales especia
	Your debts are profamily, or household	r <b>imarily cons</b> u old purpose." 1	i <b>mer debts, Consun</b> I U.S.C. § 101(8), Fi	ner debts are those "incurred by a Il out lines 8-9g for statistical purp	an individual proposes, 28 U.S.	rimarily for a perso C. § 159.	nal,	
	Your debts are no this form to the cou	ot primarily co urt with your ot	nsumer debts. You her schedules.	a have nothing to report on this pa	art of the form.	Check this box an	ıd submit	
				g de la companya da esta di deservación de companya de la companya				ns seen ett en helle fill Lydaj verkven men vermen symmette sin seel s
8.	From the Statement ( Form 122A-1 Line 11;	of Your Currei OR, Form 122	nt Monthly Income: B Line 11; OR, Form	Copy your total current monthly in 122C-1 Line 14.	ncome from O	Official	\$	3,333.00
9.	Copy the following sp			Part 4, line 6 of Schedule E/F:	Total cl	alm .		
	9a. Domestic support c	obligations (Cor	oy line 6a.)		\$	0.00		
	9b. Taxes and certain o	other debts you	owe the governmen	nt. (Copy line 6b.)	\$	0.00		
;	9c. Claims for death or	personal injury	while you were into	exicated. (Copy line 6c.)	\$	0.00		
!	9d. Student loans. (Cop	by line 6f.)			\$	21,666.00		
9	9e. Obligations arising priority claims. (Cop	out of a separa by line 6g.)	tion agreement or d	ivorce that you did not report as	\$	0.00		
ę	9f. Debts to pension or	profit-sharing	plans, and other sim	ilar debts. (Copy line 6h.)	+ \$	0.00		:
ć	∂g. <b>Total.</b> Add lines 9a	through 9f.			\$	21,666.00		:

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 11 of 56

Fill in this i	iformation to identi	ly your case: ⟩			V
Debtor 1	Trisshauna First Name	K Middle Name	Daniels		
Debtor 2 (Spouse, if filing		Middle Name	Last Name		
_		e: Northern District of III	Lasi Name		
Case number					
-14%		· · · · · · · · · · · · · · · · · · ·			Check if this is an amended filing
					difference filling
	I Form 106E				
<u>Decl</u>	aration A	\bout an I	ndividual	Debtor's Schedules	12/15
If two man	ried people are filing	together, both are ec	ually responsible for s	upplying correct information.	
You must t	file this form whene	ver you file bankrupto	y schedules or amende	ed schedules. Making a false statement, con-	cealing property, or
years, or b	noney or property both. 18 U.S.C. §§ 15	y fraud in connection 2, 1 <mark>341, 15</mark> 19, and 357	i with a bankruptcy cas ′1.	e can result in fines up to \$250,000, or impris	sonment for up to 20
	Sign Below				
Did you	pay or agree to pay	someone who is NO	T an attorney to help ye	ou fill out bankruptcy forms?	
₩ No				• •	
Yes.	. Name of person				laration, and
				Signature (Official Form 119).	
	_				
Under p	enalty of penjury, Lo	declare that I have rea	d the summary and sci	hedules filed with this declaration and	
Mat the	y are true and corre	ct.			
	K 1				
XXX			×		
Signatur	e of Debtor 1		Signature of Debto	or 2	
Date NA	18 3018	ì	Date	WW .	

#### Case 18-19646 Entered 07/13/18 11:54:01 Desc Main Doc 1 Filed 07/13/18 Document Page 12 of 56

		Doddinont 1 ago 12 of 00		
Fill in this Ir	nformation to identify your pase and	d this filling:		
Dahlard	Trisshauna K. Dan	iole		
Deblor 1	First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name Middle Name	Last Name		
	N.W.C:			
United States	Bankruptcy Court for the: Northern Distric	ct of Illinois		
Case number				Check if this is a
			'	amended filing
Official	Form 106A/B			
Caba	dula AlD. Duana	no stru e		
our -	<u>dule A/B: Prope</u>	T LY		12/15
. Do you ov	vn or have any legal or equitable in	ing, Land, or Other Real Estate You Own o	·	
	o to Part 2. Vhere is the property?			
1.1.	et address, if available, or other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount of any secur	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of th
		Manufactured or mobile home	entire property?	portion you own?
V attracts to a se		Land	\$0.00	\$0.00
City	State ZIP Co	Investment property  Timeshare  Other	Describe the nature interest (such as fee the entireties, or a lit	simple, tenancy by
		Who has an interest in the property? Check	cone.	
		Debtor 1 only Debtor 2 only	THE STATE OF THE S	
Cou	nty	Debtor 2 only  Debtor 1 and Debtor 2 only	Check if this is co	ommunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about t property identification number:		
If you own	or have more than one, list here:			
1.2.	et address, if available, or other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	ed claims on Schedule D:
Street	si address, ii avaliavie, or other description	Condomínium or cooperative  Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		— 🔾 Land	\$ 0.00	\$ 0.0
		☐ Investment property	Describe the nature	of your ownership
		I Timeshare	acacing inc natite (	or your ownership

Official Form 106A/B

City

County

Debtor 1 and Debtor 2 only

At least one of the debtors and another

property identification number:

Who has an interest in the property? Check one.

Other information you wish to add about this item, such as local

☐ Timeshare

Debtor 1 only Debtor 2 only

Other |

ZIP Code

State

interest (such as fee simple, tenancy by

the entireties, or a life estate), if known.

Check if this is community property

(see instructions)

Document Page 13 of 56 Trisshauna **Daniels** Debtor 1 Case number (if known) First Name Middle Name Lasi Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: 1.3. Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Condominium or cooperative Current value of the entire property? portion you own? Manufactured or mobile home 0.00 0.00 Land ☐ Investment property City ZIP Code ☐ Timeshare Describe the nature of your ownership State interest (such as fee simple, tenancy by Other\_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. MININE WILLIAM STREET Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Volkswagon Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Tiguan Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2013 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 12,100.00 0.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions)

X X

Case 18-19646

Doc 1

Filed 07/13/18

Entered 07/13/18 11:54:01

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 14 of 56

Trisshauna K Daniels

Make:  Model:  Year:  Approximate mileage:	Who has an interest in the property? Check one.				
Year;		the conservation	duct secured cl	aims or ex	emptions. Put
		Creditors	nt of any secure Who Have Clair	iu ciaims o ms Secure	n Scheaule D. ed by Property.
Approximate mileage:	Debtor 2 only Debtor 1 and Debtor 2 only	Current	value of the	Curren	it value of th
	At least one of the debtors and another	entire p			i you own?
Other information;	TW ISSUE OF THE CONTROL AND THE				
	Check if this is community property (see instructions)	\$	0.00	\$	0.0
, Make:	Who has an interest in the property? Check one.	Do not de	duct secured cla	aims or ex	emntions Put
Model:	Debtor 1 only	the amour	nt of any secure	d claims or	n Schedule D:
Year:	Debtor 2 only	Creatiors	Who Have Clair	ns Secure	d by Property.
	Debtor 1 and Debtor 2 only	Current of entire pr	value of the		t value of th
Approximate mileage:	At least one of the debtors and another	enure pr	operty?	portion	you own?
Other information:	Check if this is community property (see instructions)	\$	0.00	\$	0.00
No Yes Make:	who has an interest in the property? Check one.	Do not ded the amount	uct secured clai	d claims on	Schedule D:
No Yes		Do not ded the amount Creditors V	of any secured Who Have Claim ralue of the	d claims on is Secured Current	Schedule D:
No Yes  Make:  Model: Year:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not ded the amount Creditors V	of any secured Who Have Claim ralue of the	d claims on is Secured Current	Schedule D: by Property. value of th you own?
No Yes  Make: Model: Year: Other information:  u own or have more than one, list	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not ded the amount Creditors V Current v entire pro	of any secured who Have Claim value of the operty?	current portion	Schedule D: Liby Property. Value of the you own?
No Yes  Make:  Model:  Year:  Other information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  here: Who has an interest in the property? Check one. Debtor 1 only	Do not ded the amount Creditors V entire pro	of any secured vince of the operty?  0.00  uct secured claim of any secu	current portion  ms or exerclaims on	Schedule D: I by Property.  value of the you own?  0.00  mptions. Put Schedule D:
No Yes  Make:  Model: Year:  Other information:  u own or have more than one, list	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  here:  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not ded the amount Creditors V entire pro	of any secured Vho Have Claim value of the operty?  0.00  uct secured claim of any secured for Have Claim	current portion  s secured  current portion  s  ms or exer claims on s Secured	Schedule D: l by Property.  value of th you own?  0.00  mptions. Put Schedule D: by Property.
No Yes  Make: Model: Year: Other information:  u own or have more than one, list in the model: Make: Model:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  here: Who has an interest in the property? Check one. Debtor 1 only	Do not ded the amount Creditors V entire pro	of any secured Vho Have Claim  On OO  Oct secured claim of any secured vho Have Claim  alue of the	current sor exerclaims on s Secured Current Current Current Current Current Current	Schedule D: I by Property.  value of th you own?  0.00  mptions. Put Schedule D:

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Page 15 of 56 Document

Debtor 1

Trisshauna First Name

K. Middle Name

Daniels Last Name

Case number (# known)\_

Describe	Your	Personal	and	Household	Items

Pares Describe You	r Personal and Household Items		
Do you own or have any l	egal or equitable interest in any of the following items?	Current value portion you Do not deduct or exemptions.	own? secured claims
6. Household goods and	furnishings	or oxemptions.	
<del>-</del>	nces, furniture, linens, china, kitchenware		
□ No			
2 Yes. Describe	Household goods and furnishings	\$	500.00
7. Electronics	\$		
collections; e	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, garnes		
☑ No ☐ Yes. Describe			
Tes. Describe	Decement of the second of the	\$	0.00
8. Collectibles of value			
Examples: Antiques and stamp, coin, o	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
Yes. Describe		\$	0.00
9. Equipment for sports ar			
Examples: Sports, photo and kayaks; c  ☑ No	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes arpentry tools; musical instruments		
🗖 Yes. Describe		\$	0.00
10. Firearms		V	
Examples: Pistols, rifles,	shotguns, ammunition, and related equipment		
Yes. Describe		\$	0.00
11. Clothes			
Examples: Everyday cloth	nes, furs, leather coats, designer wear, shoes, accessories		
	Clothes	\$	300.00
12. Jewelry			
gold, silver	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
No Sescribe Yes. Describe		\$	0.00
13.Non-farm animals		-	
Examples: Dogs, cats, bir	ds, horses		
☑ No ☐ Yes. Describe		\$	0.00
ا۔ 14.Any other personal and I	household items you did not already list, including any health aids you did not list		
☑ No			
Yes. Give specific information.		\$	0.00
	If of your entries from Part 3, including any entries for pages you have attached here	\$	800.00

Document

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Page 16 of 56

Debtor 1

Trisshauna

K. Middle Mame

Daniels Last Name

Case number (# known)\_

Pan 2) Describe Your Financial Assets

Do you own or have any	y legal or equitable interest i	any of the following?		portion ye	ict secured claim
16. Cash					
	i have in your wallet, in your ho	me, in a safe deposit box, and on hand when you	file your petition		
☑ No					
☐ Yes	·		Cash:	\$	0.00
and other s	savings, or other financial acco similar institutions. If you have r	unts; certificates of deposit; shares in credit unions multiple accounts with the same institution, list eacl	s, brokerage house h.	s,	
☑ No ☐ Yes	,				
165		Institution name:		•	
	17.1. Checking account:			_ \$	0.00
	17.2. Checking account:				0.00
	17.3. Savings account:				0.00
	17.4. Savings account:			**************************************	0.00
	17.5. Certificates of deposit:			-	0.00
	17.6. Other financial account:			*	0.00
	17.7. Other financial account:				0.00
	17.8. Other financial account:			***************************************	0.00
	17.9. Other financial account:			Y	0.00
				\$	0.00
		erage firms, money market accounts			
165	Institution or issuer name:				
				. \$	0.00
	V			. \$	0.00
				\$	0.00
. Non-publicly traded st an LLC, partnership, a	ock and interests in incorpor nd join€∀enture	rated and unincorporated businesses, including	g an interest in		
Ø No	Name of entity:		% of ownership:		
Yes. Give specific information about	WA-		0%%	\$	0.00
them			0%%	\$	0.00
		(	0% ~		ስ ስስ

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 17 of 56

	risshauna First Name	Middle Name	Daniels		Case	number (irknown)		
	t list typing	Minde Made	Last Name			*		**************************************
						***		
20. Governmer Negatiable i	nt and corp	orate bonds ar	d other neg	otiable and non-neg	otiable instruments			
Non-negotia	able instrum	ents are those y	ou cannot tr	ansfer to someone by	ssory notes, and mone signing or delivering t	ey orders. hem.		
<b>Ø</b> No								
Yes. Given information	e specific ion about	Issuer name:	<b>30</b>	CASSES AND SOUTH MAKES	se Se som marrie			
								0.0
			· · · · · · · · · · · · · · · · · · ·				\$	0.0
							\$	0.0
21. Retirement	or pension	accounts						
Examples: Ir			gh, 401(k), 4	103(b), thrift savings a	ccounts, or other pens	sion or profit-shari	ng plans	
No								
Yes. List account s		Type of accoun	t: Institu	ition name:				
	-	401(k) or similar	nlan:				œ.	0.0
			higis.				<u> </u>	0.00
		Pension plan:						
		IRA:			W 4100		\$	0.00
		Retirement acco	unt:				\$	0.00
		Keogh:					\$	0.00
		Additional accou	nt:				\$	0.00
		Additional accoun	nt:					0.00
Examples: Ag companies, o	greements v	deposits you ha	ve made so epaid rent, p	that you may continue public utilities (electric,	e service or use from a , gas, water), telecomr	a company munications		
☑ Yes			Institution r	name or individual:				
		Electric:	•				\$	0.00
		Gas:	***************************************				<b>\$</b>	0.00
		Heating oil:						0.00
			n rental unit:	Michigan Beach A	<u> </u>		\$	1,100.00
		Prepaid rent:				······································	\$	0.00
		Telephone:					<b></b> \$	0.00
		Water:					\$	0.00
		Rented furniture: Other:					\$	0.00
		Office.		7 FAT (1871-141-141-141-141-141-141-141-141-141-1				0.00
. Annuities (A c	contract for a	a neriodic pavm	ent of money	to you either for life	or for a number of yea	ure)		
☑ No		- pariodio payin	on money	, to you, ounce for me i	ог от а напівегот ува	noj		
☐ Yes		Issuer name and	description:					
			,	ATV/FFSSF-SAF-SF-SA k for			\$	0.00
	•	· · · · · · · · · · · · · · · · · · ·					\$	0.00
							r	0.00

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 18 of 56

Debtor 1	Trisshauna	K.	Daniels	Case number (# known)		
	First Name Mid	ddle Name	Last Name	Case Harrison (v. Anown)	· ·	
				E program, or under a qualified state tuition program.		
	C. §§ 530(b)(1), 529	9A(b), and	529(b)(1).			
M No						
☐ Yes		···· Institu	tion name and description, S	separately file the records of any interests.11 U.S.C. § 521(c)	):	
					¢	0.00
		0.00	The state of the s		Φ	0.00
					Ð	0.00
					\$	0.00
5. Trusts.	equitable or future	interests	in property (other than an	ything listed in line 1), and rights or powers		
exercisa	able for your bene	fit	m proporty (outer train are	yanng noted in line 1), and rights of powers		
<b>2</b> No						
	. Give specific				-	
infor	mation about them				\$	0.00
o Dotomio				A STATE OF THE PROPERTY OF THE	3	
			ide secrets, and other intel	llectual property ies and licensing agreements		
☑ No			Jones, proceeds from royale	les tha horising agreements		
	Give specific		THE POSITION AND ADDRESS OF THE ADDR		1	
	mation about them			İ	\$	0.00
		!	98 (1991) de Cale de Cale de Camana de Camana de Camana de Camana de Camana de Cale de			
	s, franchises, and					
Example	es: Building permits,	exclusive	licenses, cooperative associ	ation holdings, liquor licenses, professional licenses		
<b>Ø</b> No			empressivit Astantischalah amang manying Panti			
Yes.	Give specific			The second secon		0.00
IUIOU	mation about them				\$	0.00
lanev ar n	roperty owed to yo	nu2		STALL TABLES HER HER ALL BURNES STATE	·	
oney or p	toperty owed to ye	Ju ;	·		N	value of the you own?
					Do not de	duct secured exemptions.
Tay rafus	nds owed to you				olainis or i	охотриона.
No.	nas oweu to you					
	Give specific inform	nation				0.00
	about them, includir	ng whether	-	Federal: \$		0.00
	you already filed the and the tax years		***************************************	State: \$		0.00
	and the tax years, i.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	onitare e	Local: \$		0.00
			Baker may remaind a block common maga, agree a companyance and a social and a	November of the control of the Contr		
. Family s	• •					
	s: Past due or lump	sum alimo	ny, spousal support, child su	upport, maintenance, divorce settlement, property settlement		
Ø No			Annual transfer trans	1976). Neterral state and		
L Yes. □	Give specific inform	ation	••••	Alimony:	¢	0.00
				Maintenance:	Ф	0.00
			W I com conve	Support:	\$	0.00
			**************************************	Divorce settlement:	\$	0.00
				Property settlement:	\$	0.00
			To receive the control of the first and the	тирелу зепенен.	Ψ	
Other an	nounts someone or sillonaid wages, die	wes you	urance naumente dischilitat	benefits, sick pay, vacation pay, workers' compensation,		
LAGITATES	Social Security be	enefits; un	orance payments, disability to paid loans you made to some	eone else		
<b>Ø</b> No						
Yes.	Give specific informa	ation				0.0
					\$	0.00

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 19 of 56

Debtor 1	I rissnauna First Name Midd	<u>K</u> ,	Daniels	Case number (if known)	
	rust warne - Midd	dle Name	Last Name		
			And the second second		
	in insurance poli				
	s: Health, disability,	or life insur	ance; health savings account (	(HSA); credit, homeowner's, or renter's insurance	
No No					
☐ Yes.	Name the insurance of each policy and I	e company	Company name:	Beneficiary:	Surrender or refund value:
·	or odon policy dila i	ISCHO VAIDE,			. 0.00
					\$ 0.00
			**************************************		s <u>0.00</u>
					\$ 0.00
If you are property t	rest in property that the beneficiary of a because someone I	a living trust,	u from someone who has di expect proceeds from a life in	ed surrance policy, or are currently entitled to receive	
No No					
☐ Yes. (	Give specific inform	ation		Victoria Miller Al Hard Al Hardyn (ph. 1974) and the Arthur Al Hardyn (ph. 1974) and the Arthur Arth	6.00
			and the state of t		\$
Examples No	s: Accidents, employ	yment dispu	tes, insurance claims, or rights	if or made a demand for payment to sue	•
☐ Yes. [	Describe each claim	Դ	•		0.00
					\$ 0.00
to set off No	claims			g counterclaims of the debtor and rights	
Yes. [	Describe each claim	າ			0.00
			y and the first production of the contraction to the production of the contraction of the		\$\$
35. <b>Any finan</b>	cial assets you die	d not alread	y list		
No.					Notice of the second se
Yes. C	Give specific informa	ation	and the second s		\$ 0.00
			Entered and declarating the entered marketing and declaration by property of the second of the second contract and contrac		
36. Add the d	lollar value of all o	of your entri	es from Part 4, including any	y entries for pages you have attached	
for Part 4.	. Write that numbe	r here		•	\$1,100.00
Part 5:	escribe Anv E	Business:	Related Property You	Own or Have an Interest In. List any	nal actata in Dawid
			The state of the s	Out of the act an interest in List any	earestate is Part I.
37. Do you ow	vn or have any leg	al or equita	ble interest in any business	-related property?	
🗹 No. Go					
Yes. G	o to line 38.				
					Current value of the portion you own?
					Do not deduct secured claims or exemptions.
8. Accounts	receivable or com	missions v	ou already earned		
☑ No		•	•		
Yes. D	escribe		CONTRACTOR OF THE CONTRACTOR O		
					\$ 0.00
	ipment, furnishing	gs, and sup	plies		•••
	lusiness-related comp	uters, softwar	e, modems, printers, copiers, fax n	nachines, rugs, telephones, desks, chairs, electronic devices	
<b>≥</b> No	\$	e	versore of the second control of the second control of the second control of the second control of the second		<u>-</u> -
☐ Yes. De	escribe				\$ 0.00
	\$				

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Page 20 of 56 Document Trisshauna **Daniels** Debtor 1 Case number (if known) First Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade 12 No Yes. Describe... 0.00 41. Inventory No No Yes. Describe... 0.00 42. Interests in partnerships or joint ventures ₩ No Yes. Describe...... Name of entity: % of ownership: 0.00 % 0.00 % 0.00 43. Customer lists, mailing lists, or other compilations ₩ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 0.00 44. Any business-related property you did not already list Ma No ☐ Yes. Give specific 0.00 information ...... 0.00 0.00 0.00 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish No No ☐ Yes..... 0.00

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 21 of 56

Trisshauna K. Daniels

Debtor 1	First Name Middle Name Last Name		Case number (if known)		
	First Name Last Name Last Name				
8. Crops-	either growing or harvested				
Z No		i Glasse en les de Laboura I, es ves ves despayas en monte sen l'anne de monte despaya despaya sengentes senge			
Yes.	Give specific	The state of the s	magney Jacobson and market, et least and the first of the properties of the commendation that the best dead for the second		
inforr	nation	11 at	The state of the s	\$	0.0
	d fishing equipment, implements, machinery, fixt			H-10-MI	
Mo No	1				
₩ Yes			en per per per per section de la company		0.0
		ad the nastace representation of the modern than the first the first and the first the	nakan damat da ka la dila 1911 1922 a timan in mananda da 15,15,155. Pepada in proprincia	\$	0.0
	d fishing supplies, chemicals, and feed				
☑ No					
⊔ Yes		A CONTRACTOR OF THE PROPERTY O	myddo, fergannau Erneffers d achris i Lathrick (Erfert achris e grant fers och s fers och befolk af befolk af Erfert (1977) for a grant (1977)	3	0.0
		anne en des de s'hethelde killet fan en er er en delembly Monden bedest de 'n 1900 en gebes per en en en en en	dereng Å annyde antaranderet ar illed H. I. 1990 for 1910	\$	0.0
	- and commercial fishing-related property you di	d not already list			
<b>Ø</b> No □	300-FERRORIS (Standards and Artificial property consideration and an advantage of the control of	ing magang magang mananak di karata ang makingkap ganggangan magan panging nap namin magan akin dala naka bakasan kak	Mikhiki katininka callada da mila adjam ada pagan pagan ya aji kala ada ada kala da ada a kala da mana masa ma	and the same of th	
	Give specific			\$	0.0
		er fin Arri findere for dender den stande 1991 fin 18 och stad 1991 fra men myndremidere dövelik av fødligde fr	And the state of t	Φ	
Add the	dollar value of all of your entries from Part 6, incl 6. Write that number here	uding any entries for page	s you have attached	\$	0.0
	The title than the ti		······································	1	
	Give specific	Printed State Market Action in Indian and Company of Co		\$	0.00
				ф	0.00
	y and the discussion for the charged property of the property of the discussion of the charged property of the charged propert	mandan iimida ar Afrikan 1986 ar 2018 Afrika 4 44, spap iir forg pan, aa ansaniba iimida Ar Ar ii iir folk daf Ar	- Marie August Angele (1904) - Angele Angele (1904) - Angele (	Ψ	
Add the d	lollar value of all of your entries from Part 7. Write	e that number here	<b>&gt;</b>	\$	0.00
				L	
rt 8:					
T B:	List the Totals of Each Part of this For	Ti)			
Part 1: To	ital real estate, line 2		·····	\$	0.00
Part 2: To	tal vehicles, line 5	\$ 0.00	)		
	tal personal and household items, line 15	\$ 800.00	- )		
	tal financial assets, line 36	\$ \$ 1,100.00	<del></del>		
		\$ 0.00	<del></del>		
	tal business-related property, line 45	\$0.00	m.		
Part 6: To	tal farm- and fishing-related property, line 52	Φ	<del>-</del>		
Part 7: To	tal other property not listed, line 54	<b>+</b> \$ 0.00	- 		
Total pers	onal property. Add lines 56 through 61	s 1,900.00	Copy personal property total 👈	- <b>+</b> ¢	1,900.00
	. , -		J	- v	
					1,900.00
otal of al	I property on Schedule A/B. Add line 55 + line 62			\$	1,300.00
				J	

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 22 of 56

Fill in this in	formation to ident	fy your case:		
	Trisshauna	K.	Daniels	zeza paritz
	First Name	Middle Name	Last Name	
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	
Jnited States E	Bankruptcy Court for th	e:Northern District of I	linois	]
Case number If known)				

Check if this is an amended filling

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

## Part 1:

### Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming	Check one only,	even if your	spouse is filing	g with	you.
----	--	-----------------	--------------	------------------	--------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exempti	
		Copy the value from Schedule A/B	Check only one box for each exemption.	Andrews and the second	
Brief description:	Automobile	\$ <u>0.00</u>	<b>⊠</b> \$ 2,400.00	735 ILCS 5/12-1001(c)	
Line from Schedule A/B:	3.1		100% of fair market value, up to any applicable statutory limit		
Brief description:	Furniture	\$ <u>500.00</u>	\$ 500.00	735 ILCS 5/12-1001(b)	
Line from Schedule A/B:	6		100% of fair market value, up to any applicable statutory limit		
Brief description:	Clothes	\$300.00	□ \$ 300.00	735 ILCS 5/12-1001(a)	
Line from Schedule A/B:	11		2 100% of fair market value, up to any applicable statutory limit		

3. Are you claiming a homestead exemption of more than \$160,375?

Subject to adjustment on 4/01/19 and every 3	years after that for cases filed on a	or after the date of adjustment."
--	---------------------------------------	-----------------------------------

M No

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
  - ☑ No
  - Q Yes

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 23 of 56

Debtor 1

Trisshauna K.

K.

Daniels

Case number (if known)

## Part 2:

## Additional Page

	ion of the property and line 4/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one hox for each exemption	
Brief description:	Security Deposit	\$1,100.00		735 ILCS 5/12-1001(b)
Line from Schedule A/B:	22		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description;		\$	<b>Q</b> \$	
Line from Schedule A/B;			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B;			100% of fair market value, up to any applicable statutory limit	
Brief description: Line from		\$	☐ \$ ☐ 100% of fair market value, up to	
Schedule A/B:	**************************************		any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:	-		any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			anne amplicable at the street fire it	
Brief description: Line from		\$	\$ 100% of fair market value, up to	
Schedule A/B:			any applicable statutory limit	
Brief description:		\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B:	Alasing they decrease que		any applicable statutory limit	Wi-t-many array ar
Brief description:		\$	\$	
Line from Schedule A/B:	MAMMINgalagiligatingsingsing		any applicable statutory limit	
Brief description: Line from		\$	\$ \$ 100% of fair market value, up to	
Schedule A/B:	NATIONAL PROPERTY OF THE PROPE		any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 24 of 56

Fill in this Information to identify your car	s <b>e</b> ž			
Debtor 1 Trisshauna K.	Daniels			
First Name Middle   Debtor 2	Name Las! Name			
(Spouse, if filing) First Name Middle I	Name Lest Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number (If known)			Choo	k if this is an
				ded filing
Official Form 106D	REPORT ACCORDA			
		ad by Dyar		
	s Who Have Claims Secur			12/15
information. If more space is needed, cop	If two married people are filing together, both are e y the Additional Page, fill it out, number the entries,	qually responsible for and attach it to this	or supplying corre form. On the top	ect of any
additional pages, write your name and cas	se number (if known).			
1. Do any creditors have claims secured b				
☑ No. Check this box and submit this for ☑ Yes. Fill in all of the information below.	m to the court with your other schedules. You have noth	ing else to report on t	this form.	
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has n	nore than one secured claim, list the creditor separately	Column A Amount of claim	Column B Value of collateral	Column C Unsecured
for each claim. If more than one creditor h	as a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Do not deduct the	that supports this	portion
ं र	according to the creator's name.	value of collateral.	claim	If any
Hertiage Acceptance	Describe the property that secures the claim:	\$ 16,552.00	\$12,100.00	0.00
1420 S. Michigan	Automobile	THE COMMENT		
Number Street				
	As of the date you file, the claim is: Check all that apply  Contingent			
South Bend IN 46556 City State ZIP Code	Unliquidated			
,	Disputed			
Who owes the debt? Check one.  Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment flen from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt	Objet (Bolderig & right to onset)	_		
Date debt was incurred 09/19/2017	Last 4 digits of account number 5 0 7 6			
2.2]	Describe the property that secures the claim:	\$ 0.00	\$ 0.00	0.00
Creditor's Name				
Number Street		Note that the same of the same		
	As of the date you file, the claim is: Check all that apply.	\$		
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)  Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	-		
community debt	Const (increasing a tight to onset)			
Date debt was incurred	Last 4 digits of account number	the construction of the think the construction of return the section of the construction of the constructi	**************************************	gangen alemanya, zakiz manyakin da kuminahan nama in na manama
Add the dollar value of your entries in C	column A on this page. Write that number here:	s <u>16,552.00</u>		

#### Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 25 of 56

**Daniels** Debtor 1 Case number (if known) **Additional Page** Column A Column C Amount of claim Value of collateral Unsecured After listing any entries on this page, number them beginning with 2.3, followed Do not deduct the that supports this portion by 2.4, and so forth. claim value of collateral. If any 0.00 0.00 Describe the property that secures the claim: 0.00 Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred \_ Last 4 digits of account number \_\_\_\_ 0.00  $0.00_{s}$ 0.00 Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated State ZIP Code ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) \_\_\_\_ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number\_ 0.00 \$ 0.00 0.00 Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent City ZIP Code ☐ Unliquidated State DALE ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment fien from a lawsuit. Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred \_ Last 4 digits of account number \_\_\_\_ Add the dollar value of your entries in Column A on this page. Write that number here: 0.00 If this is the last page of your form, add the dollar value totals from all pages. 0.00 Write that number here:

Trisshauna

#### Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main

Page 26 of 56 Document Trisshauna Daniels Deblor 1 Case number (if known), 27.1/1 List Others to Be Notified for a Deht That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number \_\_\_\_ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_ Name Last 4 digits of account number \_\_\_\_ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number \_\_\_\_\_ Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number 5 0 7 6 THE DOOR SHEET SHEET SHEET Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number \_\_\_\_\_ THE CENTRE Number Street City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number \_\_\_\_\_\_

City

Number

Street

State

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Page 27 of 56 Document Fill in this information to identify your case: Trisshauna K **Daniels** Debtor 1 First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name • United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 12. List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Nonpriority amount amount 2.1 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent ZIP Code Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were Intoxicated is the claim subject to offset? Other, Specify ☐ No ☐ Yes Last 4 digits of account number

Official Form 106F/F

No Yes

City

Priority Creditor's Name

Debtor 1 only

Debtor 2 only

Who incurred the debt? Check one.

At least one of the debtors and another

☐ Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

is the claim subject to offset?

Type of PRIORITY unsecured claim:

Domestic support obligations

When was the debt incurred?

Contingent

Unfiquidated
Disputed

intoxicated Other. Specify

ZIP Code

As of the date you file, the claim is: Check all that apply.

Taxes and certain other debts you owe the government

Claims for death or personal injury while you were

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Trisshauna K Documbentels Page 28 of 56

Debtor 1

#### Part 1: Your PRIORITY Unsecured Claims - Continuation Page

		amount	amou
Last 4 digits of account number	\$	\$	. \$
When was the debt incurred?			
As of the date you file, the claim is: Check all that apply.			
Unliquidated			
☐ Disputed			
Type of PRIORITY unsecured claim:			
***			
intoxicated			
- Caron Special			
		ra keneraranan kenaran sentera karen.	esperamentalismen
and a sign of dooding fallings	-	T	<b>-</b>
When was the debt incurred?			
As of the date you file, the claim is: Check all that apply.			
•			
☐ Disputed			
Type of PRIORITY unsecured claim:			
Domestic support obligations			
		orth de angellange angelange angelange angelange angelange angelange angelange angelange angelange angelange a	et i delevitor a someoni de que
Last 4 digits of account number	\$	\$	s
			`
When was the debt incurred?			
As of the date you file, the claim is: Check all that apply.			
- 11.7			
☐ Unliquidated			
☐ Disputed			
Type of PRIORITY unsecured claim:			
intoxicated	niket/kritispiriterniken eteksioniketeksteristististeristististekskepteksionike	vahinaneggeggeste-konstenden kandesterii-kandes	Modern errors property of the
	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Disputed  Last 4 digits of account number Unliquidated Disputed  Last 4 digits of account number Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Contingent Unliquidated Disputed  Contingent Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated Cher. Specify  Last 4 digits of account number Claims for death or personal injury while you were intoxicated Cother. Specify  Last 4 digits of account number Uniquidated Disputed  Type of PRIORITY unsecured claim: Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number Summary Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number Summary Claims for death or personal injury while you were intoxicated Disputed  Type of PRIORITY unsecured claim: Contingent Unliquidated Disputed	When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number S S When was the debt incurred?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number S S S When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Contingent Unliquidated Disputed

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Trisshauna K Documentels Page 29 of 56 Case number (# known)

Debtor 1

Part 2:

List All of Your NONPRIORITY Unsecured Clair
--

3.	Do any creditors have nonpriority to No. You have nothing to report in Yes			st you?  n to the court with your other schedules.				
4.	nonpriority unsecured claim, list the cr	reditor sepa editor holds	rately for each a particular c	etical order of the creditor who holds en claim. For each claim listed, identify wholaim, list the other creditors in Part 3.If yo	at type of claim it	is Do no	t list clai	ime already
	1			•			Tota	l claim
4.1	Tcf Bank			Last 4 digits of account number	5 0 7 6			1,000.00
	Nonpriority Creditor's Name			When was the debt incurred?	05/01/2018	-	\$	1,000.00
	15350 Cedar Ave			Trien was the dept incurred (	00/01/2010			
	Apple Valley	MN State	55124 ZIP Code	As of the date you file, the claim	is: Check all that a	pply.		
				☐ Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only			☐ Disputed				
	Debtor 2 only							
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:			
	At least one of the debtors and another	3f		Student loans				:
	Check if this claim is for a comm	unity debt		Obligations arising out of a separ that you did not report as priority	ation agreement or	divorce		:
	Is the claim subject to offset?			Debts to pension or profit-sharing		milar debts		i
	☑ No ☑ Yes			☑ Other Specify Banks	***************************************			:
.2	Bank Of American Nonpriority Creditor's Name			Last 4 digits of account number When was the debt incurred?	<u>5 0 7 6</u> 05/01/2018	1744 EPA Profesional Section (1864)	\$	700.00
	Po Box 15168							
	Number Street							
	Wilmington	DE	19850	As of the date you file, the claim	is: Check all that ap	oply.		
	City	State	ZiP Code	Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only			☐ Disputed				
	Debtor 2 only			Type of NONPRIORITY unsecu	rad alaim.			•
	Debtor 1 and Debtor 2 only				ed Claim.			
	At least one of the debtors and anothe	<b>1</b>		<ul><li>Student loans</li><li>Obligations arising out of a separa</li></ul>		-C		
	☐ Check if this claim is for a commu	unity debt		that you did not report as priority of	claims			
	Is the claim subject to offset?			Debts to pension or profit-sharing	plans, and other sir	nilar debts		
	☑ No			☑ Other. Specify Banks				
<del></del>	☐ Yes	and the state of t	edinthrossessessessessessessessesses	eri del Valura de la comencia de la	Pilliologi kitanoma sinkay asilanina nyangangangan sarina na	NACON NEWS AND		
.3	Comcast			Last 4 digits of account number	5 0 7 6			1 670 00
	Nonpriority Creditor's Name				05/01/2018	-	\$	1,678.00
	Po Box 3002 Number Street				· · · · · · · · · · · · · · · · · · ·			
	number Street							
	City	State	ZIP Code	As of the date you file, the claim i	s: Check all that ap	oly.		
	Who incurred the debt? Check one.			☐ Contingent				
	Debtor 1 only			Unliquidated				
	Debtor 2 only			☐ Disputed				
	Debtor 1 and Debtor 2 only			Type of NONBRIGHTY	ad ala!			
	At least one of the debtors and another			Type of NONPRIORITY unsecur	ea claim:			
	Check if this claim is for a commu	ınity debt		<ul> <li>Student loans</li> <li>Obligations arising out of a separa that you did not report as priority c</li> </ul>	tion agreement or d	livorce		
	Is the claim subject to offset?			Debts to pension or profit-sharing		nilar dohte		
	No			Other. Specify Cable Comp.		mar utula		
	Yes							

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Trisshauna K Documentels Page 30 of 56 Case number (# known)

Debtor 1

غادا	11.7

Northwestern Memorial	Hospital		Last 4 digits of account number 5 0 7 6	<sub>\$</sub> _1,500.	
Nonpriority Creditor's Name 251 E Huron St			When was the debt incurred? 05/01/2018	φ .,,σσσ.σ	
Number Street Chicago	IL	60611	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
			☐ Unliquidated		
Who incurred the debt? Check	one.		☐ Disputed		
Debtor 1 only Debtor 2 only			Time of MONDRIADITY		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and	another		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>		
Check if this claim is for a	community deb	t	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other Specify Hospital Bill		
☑ No ☐ Yes					
University Of Chicago	rendert deltahert de Militater (Petitien) de minimus andertimen de vid	um-europaint-h-h-hadient-ketti tiilihattiin een-pela jalgaatuksti-gista kastiiniste ja	Last 4 digits of account number 5 0 7 6	\$ 2,500.0	
Nonpriority Creditor's Name			When was the debt incurred? 05/01/2018		
5841 S Maryland Ave			when was the debt mouned:		
Number Street Chicago	IL	60637	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
110 L L L L L L L L L L L L L L L L L L			Unliquidated		
Who incurred the debt? Check	one.		☐ Disputed		
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only					
At least one of the debtors and	another		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>		
Check if this claim is for a	ommunity debt		you did not report as priority claims		
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
☑ Yes			☑ Other. Specify Hospital Bill		
Rent A Center	antigand (section) of the section of		Last 4 digits of account number 5 0 7 6	\$ 900.0	
Nonpriority Creditor's Name Attn: Customer Care 550	1 Headquart	ers Dr	When was the debt incurred? 05/01/2018		
Number Street Plano	TX	75024	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
1844 A			Unliquidated		
Who incurred the debt? Check of	e.		☐ Disputed		
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			••		
At least one of the debtors and	another		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>		
Check if this claim is for a c	ommunity debt		you did not report as priority claims		
Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Furniture Rental		
☑ No ☐ Yes			- Sulei, opeony . a		

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Trisshauna K Documents Page 31 of 56 Case number (# known)

Debtor 1

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а	. 1	,	•	•

Value City			Last 4 digits of account number 5 0 7 6	s 1,100.
Nonpriority Creditor's Name			When was the debt incurred? 05/01/2018	\$ 1,100.
8310 S Cicero Ave			When was the debt incurred? US/U1/2018	
Number Street Burbank	IL	60459	As of the date you file, the claim is: Check all that apply.	
City	State	ZiP Code	Contingent	
			☐ Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only Debtor 2 only			T(NONDOLONIA)	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	her		Student loans	
☐ Check if this claim is for a comm			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Furniture Rental	
M No			Other. Opening Territories	
Yes				
Sprint Wireless			Last 4 digits of account number 5 0 7 6	<b>\$</b> 300.
Nonpriority Creditor's Name			When was the debt incurred? 05/01/2018	
6391 Sprint Parkway			- Then was the dept mouned:	
Overland Park	KS	66251	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
			☐ Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only  At least one of the debtors and anoth	nor.		Student loans	
			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Check if this claim is for a comm	nunity debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other Specify Mobile Phone Account	
☑ No				
Yes				
T-Mobile	1900-1903 (1995) - 1900-1904 (1995) (1995) (1995) (1995) (1995) (1995) (1995) (1995) (1995) (1995) (1995) (199	r Turk di Turk di di Parti di Parti di Parti di Parti di Turk di Parti di P	Last 4 digits of account number 5 0 7 6	<sub>\$1,200.0</sub>
Nonpriority Creditor's Name		-With the World		
Po Box 53410			When was the debt incurred? 05/01/2018	
Bellevue	WA	98015	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			Unliquidated	
Debtor 1 only			Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and anoth-	er		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
Check if this claim is for a comm			you did not report as priority claims	
Is the claim subject to offset?	,,		Debts to pension or profit-sharing plans, and other similar debts	
No			☑ Other. Specify Mobile Phone Account	

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Trisshauna K Documentels Page 32 of 56 Case number (if known)

Debtor 1

Part 2:

5.1					
0.1	City Of Chicago Department	Of Finar	ice	Last 4 digits of account number 5 0 7 6	\$_4,000.0
	Nonpriority Creditor's Name Po Box 4641			When was the debt incurred? 05/01/2018	
	Number Street Chicago	IL	60680	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	ar		Student loans	
	☐ Check if this claim is for a comm			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	anity debt		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Tickets	
	₩ No			Other. Specify Tionets	
	Yes				
.2	ComEd	and progressive surveyors.	et til koloniste på til koloniste til koloniste for koloniste til koloniste til koloniste til koloniste til ko	Last 4 digits of account number 5 0 7 6	s 300.0
	Nonpriority Creditor's Name			When was the debt incurred? 05/01/2018	V
	Po Box 6111 Number Street			when was the debt incurred?	
	Carol Stream	IL	60197	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent  Unliquidated	
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed	
	Debtor 1 only			,	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	er .		Student loans	
	☐ Check if this claim is for a comm	unity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	unity dobt		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Utilities	
	✓ No  Yes			ac Other. Specify Othities	
.3	tartiere en in eg de tieret de gert de tit activitée de la tartier de souther de souther au de châte de production de souther au de châte de production de souther au de châte de production de souther au de châte	يتناو المستند المستند والمستند	i e Veletilieri e le tri est arrel antique y en le marier plan arrego per principaçõe, est pape pe	Last 4 digits of account number 5 0 7 6	\$700.0
	Peoples Gas Nonpriority Creditor's Name			*** **********************************	
	200 E Randolph St			When was the debt incurred? 05/01/2018	
	Number Street Chicago	IL.	60601	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only			- Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only  At least one of the debtors and anothe	•		Student loans	
	☐ Check if this claim is for a commu			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?			<ul> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify Utilities</li> </ul>	
	☑ No ☐ Yes			Other. Specify Outlities	

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Trisshauna K Documentus Page 33 of 56 Case number (# known)

Debtor 1

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38.	×	1	t	z	4
				400	

Nonpriority Creditor's Name 2701 S Dirksen Parkwa		Last 4 digits of account number 5 0 7 6	\$0
	<b>v</b>	When was the debt incurred? 05/01/2018	
Number Street Springfield	IL 62723	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
		☐ Unliquidated	
Who incurred the debt? Check	one.	☐ Disputed	
Debtor 1 only Debtor 2 only		Time of NONDRIODITY was asset also	
Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another	☐ Student loans	
Check if this claim is for a		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	community dept	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?		Other. Specify Notice Only	
☑ No ☐ Yes			
True Accord		Last 4 digits of account number 5 0 7 6	s 1,046
Nonpriority Creditor's Name		05/04/0040	Ψ
303 2nd Street Suite 750	) South	When was the debt incurred? 05/01/2018	
Number Street San Francisco	CA 94107	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who incurred the debt? Check		Unliquidated	
Debtor 1 only	one,	Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		_	
At least one of the debtors and	another	<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>	
Check If this claim is for a	community dabt	you did not report as priority claims	
	Community desit	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?		other. Specify Collection Account	
Yes			
Täälidelemän oli valkallamintalelastinapuolukendelen ymistääninen puovan vuon vuon sa sassan yryssy s	i Maria de Carlo Maria de Seculio de describo de Artino de Carlo d	Last 4 digits of account number	\$
Nonpriority Creditor's Name		When was the debt incurred?	
Number Street		As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
		☐ Unliquidated	
Who incurred the debt? Check	one.	☐ Disputed	
Debtor 1 only		T (MONEMONIA)	
Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another	Student loans	
***		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Check if this claim is for a c	conununity debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?		Other. Specify	

Case 18-19646

Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main K Documents Page 34 of 56

Debtor 1

Trisshauna

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For

Part 3:

## List Others to Be Notified About a Debt That You Already Listed

Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check and) Det 4: Creditor with Driving the Income of Oking
Number Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Code	Last 4 digits of account number
ONLY STATE ZIF COUR	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Claims Part 2: Creditors with Nonpriority Unsecured
Dity State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
lumber Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	
lame	On which entry in Part 1 or Part 2 did you list the original creditor?
tumber Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
	Claims Claims
Sity State ZIP Code	Last 4 digits of account number
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
umber Street	
oner Otteer	Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1

Trisshauna

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main

Documber | Page 35 of 56 humber (if known)\_\_\_\_\_

Part 4:

### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a	. Domestic support obligations	6a.	\$0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c	. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d	. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$0.00
	6e	. <b>Total</b> . Add lines 6a through 6d.	6e.	s0.00
				Total claim
Total claims	6f.	Student loans	6f.	
Total claims from Part 2		Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	Total claim
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		Total claim  \$ 0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	6g.	\$ 0.00 \$ 0.00

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 36 of 56

Debtor	Trisshauna	K.	K. Daniels		
,	First Name		Middle Name	l.asi Name	
Debtor 2					
(Spouse If filing)	First Name		Middle Name	Last Name	
United States E	Bankruptcy Court fi	or the: Nort	hern District of Illino	is	Y
Case number (If known)				INVESTOR IN THE PROPERTY OF TH	

Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

State

ZIP Code

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease State what the contract or lease is for Michigan Beach Apartment Apartment Lease Yearly Contract 7251 South Shore Drive - 17F Number Street Chicago 60649 City State ZIP Code 2.2 Name Number Street City State ZIP Code 2.3 Name Number Street City State ZIP Code 2.4 Name Number City State ZIP Code 2.5 Name Number Street

City

#### Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 37 of 56

Trisshauna K. **Daniels** Debtor 1 Case number (#known) Last Name Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 2.2 Name Number Street City State ZIP Code 2.\_\_ Name Number Street City State ZIP Code 2.\_\_ Name Number Street City State ZIP Code Name Number Street City State ZIP Code Name Number Street City ZIP Code State Name Number Street City State ZIP Code Name Number Street City ZIP Code State Name Number Street City State ZIP Code

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 38 of 56

shauna	rx,	Daniels	
ame	Middle Name	Last Name	
me	Middle Name	Last Name	
ptcy Court for th	e: Northern District of	Illinois	
	ame	ame Middle Name	ame Middle Name Last Name

Check if this is an amended filing

#### Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint of	case, do not list either spouse	as a codebtor.)
	No No		
	Yes		
2.	Within the last 8 years, have you lived in a commun Arizona, California, Idaho, Louisiana, Nevada, New Me	nity property state or territor exico, Puerto Rico, Texas, Wa	y? (Community property states and territories include ishington, and Wisconsin.)
	No. Go to line 3.		
	Yes. Did your spouse, former spouse, or legal equi	ivalent live with you at the time	e?
	☑ No		
	Yes. In which community state or territory did y	ou live?	Fill in the name and current address of that person.
Total Control of the	Name of your spouse, former spouse, or legal equivalent		
	Number Street		
	City State	ZIP Code	_
	Schedule D (Official Form 106D), Schedule E/F (Offi Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt
3.1			Check all schedules that apply:
	Name		Schedule D, line
	Number Street		Schedule E/F, line
	ianunai 2fteet		☐ Schedule G, line
	City State	ZIP Code	<del></del>
3.2		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Name		Schedule D, line
			☐ Schedule E/F, line
	Number Street		☐ Schedule G, line
·	City State	ZIP Code	***************************************
3.3		The Maria Later than a few Maria and a maria few from the configuration of the American principal principal few from the configuration of the Configuration	Market (1900) and the state of
	Name		Schedule D, line
	4		Schedule E/F, line
	Number Street		Schedule G, line
***	City State	ZIP Code	
			Note: the second control of the second contr

Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 39 of 56

Daniels

Trisshauna

First Name

Debtor 1

Case number (# known)\_

Cohima	: Your codebtor			
Column	. Your codebior			Column 2: The creditor to whom you owe the debt
- 1951 (1951) 				Check all schedules that apply:
Nome				Schedule D, line
Name				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	N. C.	
***************************************	e personer som som ett spås om fra som dig som som en grekene ett sidhes kild som som ett	SUBRE COMMUNICATION CONTROL COMMUNICATION CO	ZIP Code	
Name				Schedule D, line
				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	<del></del>
ļ				
Name				Schedule D, line
***************************************				Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	_
				The second section is a second discount of the second section sec
Name		W-M-1		Schedule D, line
***************************************				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	
				Schedule D, line
Name				
Number	Street			Schedule E/F, line
City	et a gangati yak manana kana atalaga ya pana da anaka anaka anaka anaka anaka ana ya aya aya	State	ZIP Code	
Name				Schedule D, line
				Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	_
		THE STATE OF THE S	AIT OUIS	
Name				Schedule D, line
				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	
Name				Schedule D, line
11	Ch4			Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	

## Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 40 of 56

Fill in this information to ident	ify your caset				
Debtor 1 Trisshauna	K.	Daniels			
First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	·		
United States Bankruptcy Court for th	e: Northern District of Illinoi	s		:	
Case number (If known)		_		Check i	if this is:
					amended filing
					applement showing postpetition chapter 13 me as of the following date:
Official Form 106I	Mariana.				/ DD / YYYY
Schedule I: Yo	ur Income				12/15
If you are separated and your sp	you are married and not ouse is not filing with you he top of any additional p	liling jointly, and y	our spouse	is living with	otor 2), both are equally responsible for n you, include information about your spouse pouse. If more space is needed, attach a f known). Answer every question.
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	<ul><li>≝ Employed</li><li>□ Not emplo</li></ul>			☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.			•		
Occupation may include studen or homemaker, if it applies.	Occupation t				
	Employer's name	Metropolitan	Family Se	rvices	
	Employer's address	235 E. 103rd Number Street			Number Street
		Chicago	IL	60625	
		City	State ZIF	Code	City State ZIP Code
	How long employed the	ere?	-		
Part 29 Give Details Abou	t Monthly Income				
Estimate monthly income as o spouse unless you are separated if you or your non-filing spouse helow. If you need more space, a	d. aave more than one employ	er, combine the info			vrite \$0 in the space. Include your non-filing for that person on the lines
,		We will	Fo	Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sa deductions). If not paid monthly	lary, and commissions (be, calculate what the monthly	efore all payroll y wage would be.	2. \$	3,333.00	\$
3. Estimate and list monthly ove	rtime pay.		3. + \$	0.00	+ \$
4. Calculate gross income. Add I	ine 2 + line 3.		4. \$	3,333.00	\$

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 41 of 56

Debtor 1	First Name Middle Name Last Name		Ca	ise number (# knov	vn)		<del></del>	
			For	Debtor 1	For Debtor		**	
Copy I	ine 4 here	<b>**</b> 4.	\$	0.00	\$	Donse		
5. List all	payroll deductions:							
5a. <b>T</b> a	ax, Medicare, and Social Security deductions	5a.	. \$	410.00	\$			
5b. <b>M</b>	landatory contributions for retirement plans	5b.	\$	0.00	\$			
5c. <b>V</b> e	oluntary contributions for retirement plans	5c.	\$	0.00	\$			
5d. <b>R</b> e	equired repayments of retirement fund loans	5d.	\$	0.00	\$			
5e. In	surance	5e.	\$	0.00	\$			
5f. <b>D</b> c	omestic support obligations	5f.	\$	0.00	_			
5g. Ur	nion dues	5g.	\$	0.00	\$			
5h. <b>Ot</b>	ther deductions. Specify:	5h.	+ \$	0.00	+ \$			
	ne payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$	410.00	\$			
7. Calcul	late total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,923.00	\$	***************************************		
. List all	other income regularly received:							
pre	et income from rental property and from operating a business, ofession, or farm							
rec	tach a statement for each property and business showing gross ceipts, ordinary and necessary business expenses, and the total onthly net income.	8a.	\$	0.00	\$			
8b. Int	terest and dividends	8b.	\$	0.00	\$			
reç	mily support payments that you, a non-filing spouse, or a depende gularly receive	ent	¥ states		Y			
set	clude alimony, spousal support, child support, maintenance, divorce ttlement, and property settlement.	8c.	\$	520.00	\$			
	employment compensation	8d.	\$	0.00	\$	***		
	cial Security	8e.	\$	0.00	\$			
Inci tha Nut	her government assistance that you regularly receive flude cash assistance and the value (if known) of any non-cash assistant you receive, such as food stamps (benefits under the Supplemental trition Assistance Program) or housing subsidies.			2.00				
Spe	ecify:	8f.	\$	0.00	\$			
8g. Per	nsion or retirement income	8g.	\$	0.00	\$	······································		
8h. <b>Oth</b>	ner monthly income. Specify:	8h.	+\$	0.00	+\$			
	other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	520.00	\$			
. Calculat Add the	te monthly income. Add line 7 + line 9. entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$\$	3,443.00	\$	0.00 =	= \$	3,443.00
Include d	I other regular contributions to the expenses that you list in Sched contributions from an unmarried partner, members of your household, you relatives.	<i>lule J.</i> ⁄our de	ependen	ts, your roomn	nates, and othe	-		
Do not in Specify:	nclude any amounts already included in lines 2-10 or amounts that are r				s listed in <i>Sche</i>	dule J. 11. <b>+</b>	\$	0.00
	amount in the last column of line 10 to the amount in line 11. The antamount on the Summary of Your Assets and Liabilities and Certain St	result	is the co	mbined month		12.	\$	3,443.00 bined
B.Do you	expect an increase or decrease within the year after you file this fo	orm?						thly income
	. Explain:				<del></del>			

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 42 of 56

Fill in this information to iden	tify your case, a				
Debtor 1 Trisshauna First Name	K. Danie  Middie Name Last Name		ock if this is:		
Debtor 2 (Spouse, if filing) First Name			An amended fi	ilina	
United States Bankruptcy Court for the	Loon seeing				tpetition chapter 13
Case number	ne. Notation District of mirrors	event /	expenses as o	f the following	g date:
(If known)		Ā	AM / DD / YYYY	-	
Official Form 106J					
Schedule J: Y	our Expenses				12/15
if known). Answer every question		filing together, both are eq rm. On the top of any addi	ually responsi tional pages, w	ble for supply rite your nan	ying correct ne and case number
ari (ii Describe Your H	ousehold				
Is this a joint case?					
Mo. Go to line 2. Yes. Does Debtor 2 live in	a separate household?				
Mo Dua		Separate Household of Deb	itor 2.		
Do you have dependents?	Q No	19 v. 1994 at his and me completely 190 of the heavy agreement property belongs at his company propagative pay	No. 1,	1985 stad adis abayang ameyabangan pap 113 Paulish 13a lad ana Qi	VANCETV PROFIT (All formatter annual profit and profit and an annual profit an annual profit and an annual profit and an annual profit an annual profit and an annual profit and an annual profit an annual profit and an a
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent			Dependent's age	Does dependent liv with you?
Do not state the dependents' names.		Son	1	5	☐ No ☑ Yes
		Daughter	1	0	☐ No ☑ Yes
		Son	8	PROPLEM LANGE LANG	☐ No ☑ Yes
		APP My commence of the second	TOTAL PROPERTY AND	MARIAN AND AND AND AND AND AND AND AND AND A	□ No □ Yes
·	(		****	**************************************	□ No □ Yes
Do your expenses include expenses of people other than yourself and your dependents?	☑ No ☐ Yes				lead 1etS
Estimate Your Ongo	oing Monthly Expenses	1999 - Contratable Commission (1994) - State Commission (1994) - Commission (1994)	designation of the second of t		** Control Con
CONSTRUCTION OF THE CONTRACT O	r bankruptcy filing date unless you	are using this form as a su	nnlament in a	Chanton 12 a	
penses as of a date after the ba plicable date.	inkruptcy is filed. If this is a supplem	ental <i>Schedule J</i> , check th	pprement in a re box at the to	p of the form	ase to report and fill in the
	n-cash government assistance if you				
	ed it on Schedule I: Your Income (Off	,	Medi	Your expen	Ses
any rent for the ground or lot.	expenses for your residence. Include	e first mortgage payments ar	1d 4.	\$	1,250.00
If not included in line 4:					
4a. Real estate taxes			4a.	\$	0.00
4b. Property, homeowner's, or			4b.	\$	0.00
4c. Home maintenance, repair,			4c.	\$	0.00
4d. Homeowner's association of	r condominium dues		4d.	\$	0.00

#### Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 43 of 56

Debtor 1 Trisshauna K. Daniels
First Name Middle Name Last Name Case number (if known)

			Your exp	penses
:	5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
	5. Utilities:	٥.		
	6a. Electricity, heat, natural gas	0.	œ.	150.00
	6b. Water, sewer, garbage collection	6a.	\$	^ ^ ^
	6c. Telephone, cell phone, Internet, satellite, and cable services	6b. 6c.	\$ \$	
	6d. Other. Specify:	6d.	Α.	0.00
7	. Food and housekeeping supplies		\$	500.00
8		7.	<b>3</b>	0.00
g		8.	\$	150.00
10		9.	\$	
11		10.	\$	
12		11.	\$	0.00
	Do not include car payments.	12.	\$	140.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.			-	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	110.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	476.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from			
	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		-	
	Specify:	19.	\$	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incon		Y	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	2 22
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	2.22
	20e. Homeowner's association or condominium dues	20e.	\$	
	,		***************************************	

## Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 44 of 56

Debtor 1	Trisshauna K. Daniels Case n	number (# known)		
21. Other	. Specify:	21.	+\$	0.00
22. Calcu	late your monthly expenses.			and the continue of the first of the second
22a. A	dd lines 4 through 21.	22a.	\$	3,133.00
22b. C	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
22c. A	dd line 22a and 22b. The result is your monthly expenses.	22c.	\$	3,133.00
23. Calcula	te your monthly net income.			
23a, C	copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,443.00
23b. C	opy your monthly expenses from line 22c above.	23b.	<b></b> \$	3,133.00
23c. S	ubtract your monthly expenses from your monthly income. he result is your <i>monthly net income</i> .	23c.	\$	310.00
24. <b>Do you</b>	expect an increase or decrease in your expenses within the year after you file this f	form?		
For exam	mple, do you expect to finish paying for your car loan within the year or do you expect you e payment to increase or decrease because of a modification to the terms of your mortga	r		
M No.				
TYes.	Explain here:			

DIMINITE DISCO

## Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 45 of 56

abtor 1 Trisshauna	K. Dar	niels		
First Name	Middle Name	Last Name	PP-PP-PP-PAMP-in Nation of Addison con-	
ebtor 2 pouse, if filing) First Name	Middle Name	Lasi Name		
ited States Bankruptcy Cour	t for the: Northern District of	f Illinois	The state of the s	
se number known)				☐ Check if this is ar
		***************************************		amended filing
ficial Form 107	7			
		irs for Indiv	viduals Filing for Bankrup	<b>itcy</b> 04/1
rmation. If more space ber (if known). Answer	is needed, attach a separ every question.	rate sheet to this for	g together, both are equally responsible for st m. On the top of any additional pages, write y	upplying correct our name and case
Give Details	About Your Marital Sta	atus and Where Y	ou Lived Refore	
What is your current m	arital status?			
☐ Married ☑ Not married				
≤ Not marned				
	have you lived anywhere	other than where y	ou live now?	
□ No	have you lived anywhere aces you lived in the last 3			Dates Debtor 2 lived there
No Yes. List all of the pla Debtor 1:		years. Do not include  Dates Debtor 1	e where you live now.	
No Yes. List all of the pla Debtor 1:  5401 S. Laflin		years. Do not include  Dates Debtor 1	Debtor 2:  Same as Debtor 1	lived there
No Yes. List all of the pla Debtor 1:		years. Do not include  Dates Debtor 1  lived there	Debtor 2:	lived there  Same as Debtor 1
No Yes. List all of the pla  Debtor 1:  5401 S. Laflin  Number Street	aces you lived in the last 3	years. Do not include  Dates Debtor 1 fived there  From	Debtor 2:  Same as Debtor 1	lived there  Same as Debtor 1  From
No Yes. List all of the pla Debtor 1:  5401 S. Laflin		years. Do not include  Dates Debtor 1 fived there  From	Debtor 2:  Same as Debtor 1	lived there  Same as Debtor 1  From
No Yes. List all of the pla  Debtor 1:  5401 S. Laflin  Number Street  Chicago	aces you lived in the last 3	years. Do not include  Dates Debtor 1 fived there  From	Debtor 2:  Same as Debtor 1  Number Street	lived there  Same as Debtor 1  From
No Yes. List all of the pla  Debtor 1:  5401 S. Laflin  Number Street  Chicago	IL. 60609 State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From To	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code	lived there  Same as Debtor 1  From  To  Same as Debtor 1
No Yes. List all of the plane  Debtor 1:  5401 S. Laflin  Number Street  Chicago  City	IL. 60609 State ZIP Code	years. Do not include  Dates Debtor 1 fived there  From	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code	lived there  Same as Debtor 1  From  To
No Yes. List all of the plan Debtor 1:  5401 S. Laflin Number Street Chicago City  4525 S. Lake F	IL. 60609 State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From To  From From	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code	lived there  Same as Debtor 1  From  To  Same as Debtor 1  From
No Yes. List all of the plane Debtor 1:  5401 S. Laflin Number Street  Chicago City  4525 S. Lake F Number Street	IL. 60609 State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From To  From From	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code	lived there  Same as Debtor 1  From  To  Same as Debtor 1  From  To
No Ves. List all of the plane Debtor 1:  5401 S. Laflin Number Street  Chicago City  4525 S. Lake F Number Street  Chicago City	IL. 60609 State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From To  From To	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code  Number Street	lived there  Same as Debtor 1  From  To  Same as Debtor 1  From  To
No Pebtor 1:  5401 S. Laflin Number Street  Chicago City  4525 S. Lake F Number Street  Chicago City  Within the last 8 years, states and territories included.	IL. 60609 State ZIP Code  IL. 60653 State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From To  From To  pouse or legal equiv	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code  Number Street	lived there  Same as Debtor 1  From  To  Same as Debtor 1  From  To  Y? (Community property
No Pebtor 1:  5401 S. Laflin Number Street  Chicago City  4525 S. Lake F Number Street  Chicago City  Within the last 8 years, states and territories inclination.	IL. 60609 State ZIP Code  IL. 60653 State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From To  To  To  pouse or legal equive, Louisiana, Nevace	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code  Number Street  City State ZIP Code  City State ZIP Code	lived there  Same as Debtor 1  From  To  Same as Debtor 1  From  To  Y? (Community property

## Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 46 of 56

Debtor 1	Trisshauna First Name M		Daniels ii Name	Case ni	umber (if known)	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
Fill i If yo	n the total amount o u are filing a joint ca No	of income you receive see and you have inc	nt or from operating a bued from all jobs and all bus come that you receive toge	inesses, including part-ti	r or the two previous cale me activities. er Debtor 1.	ndar years?
	Yes. Fill in the detail	S.	Saffan (1989), king (1984 - 1986), king (1984	and the second s	NAMES WITH THE PARTY AND A STATE OF THE PARTY	
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of the date you filed t	current year until for bankruptcy:	Wages, commissions, bonuses, tips  Operating a business	\$10,218.00	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
	For last calendar y	/ear:	Wages, commissions,		☐ Wages, commissions,	
	(January 1 to Decer	mber 31, <u>2016</u> YYYY	bonuses, tips ) D Operating a business	\$ 28,000.00	bonuses, tips  Operating a business	\$
	For the calendar ye	ear before that:	Wages, commissions, bonuses, tips	20,000,00	Wages, commissions, bonuses, tips	
	(January 1 to Decer	nber 31,2017	Operating a business	\$28,000.00	Operating a business	\$
List e	each source and the	gross income from (	each source separately. Do		ed together, list it only once you listed in line 4.  Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of the date you filed f		Child Support	\$ 2,340.00 \$		\$\$
				\$		\$
	For last calendar y	rear:		\$		\$
	- (January 1 to Decer	mbec31,2016 YYYY		B		\$
	For the calendar yo					\$ \$ \$

## Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 47 of 56

Payment  S S Morto  Creditor's Name	
6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?  No. Go to line 7.  Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.  Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  No. Go to line 7.  Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  Dates of Total amount paid Amount you still owe payment  Creditors Name  S	
<ul> <li>No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."         During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?         ✓ No. Go to line 7.         ✓ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.             Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.             ✓ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.             During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?             ✓ No. Go to line 7.             ✓ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.             Dates of Total amount paid Amount you still owe Payment             Mortg             Creditor's Name             Mortg             Mortg             Creditor's Name             Mortg</li></ul>	
<ul> <li>No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."         During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?         ✓ No. Go to line 7.         ✓ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.             Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.             ✓ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.             During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?             ✓ No. Go to line 7.             ✓ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.             Dates of Total amount paid Amount you still owe Payment             Mortg             Creditor's Name             Mortg             Mortg             Creditor's Name             Mortg</li></ul>	
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?  Ves. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  *Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.  Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  No. Go to line 7.  Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  Dates of payment  Total amount paid Amount you still owe Was this Creditor's Name  Creditor's Name	
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?  Ves. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.  Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  No. Go to line 7.  Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  Dates of payment  Total amount paid Amount you still owe was this payment.  Creditor's Name	
<ul> <li>☐ Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.</li> <li>* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.</li> <li>☐ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.</li> <li>☐ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?</li> <li>☑ No. Go to line 7.</li> <li>☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.</li> <li>☐ Dates of payment</li> <li>☐ Total amount paid Amount you still owe payments in payment</li> <li>☐ Morted Creditor's Name</li> </ul>	
total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.  Description:  * Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  No. Go to line 7.  Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  Dates of Total amount paid Amount you still owe payment  **Description**  **Description**  **Dates of Total amount paid Amount you still owe payment  **Description**  **De	
* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.  The second of the second	
☐ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  ☑ No. Go to line 7.  ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  ☐ Dates of payment  ☐ Total amount paid  ☐ Amount you still owe payments to an attorney for this bankruptcy case.  ☐ Creditor's Name	
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?  ✓ No. Go to line 7.  ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  ☐ Dates of payment  ☐ Total amount paid Amount you still owe was this payment  ☐ Creditor's Name  ☐ Car	
✓ No. Go to line 7. ✓ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Payment Creditor's Name Morte Creditor's Name	
Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  Dates of payment  Total amount paid Amount you still owe payments to an attorney for this bankruptcy case.	
Creditor's Name  S \$ Morto  Car	
Creditor's Name	payment for
Car	1200
Number Street	yage .
Harmon direct	t card
□ Loan	repayment
☐ Suppl	liers or vendors
City State ZIP Code	
Creditor's Name	age
Car	
Number Street · · · · · · · · · · · · · · · · · ·	card
	repayment
	iers or vendors
City State ZIP Code	
\$\$ Mortge	ane
Creditor's Name	<b>.</b>
Number Street Credit	card
Loan r	
	ers or vendors
City State ZIP Code	

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 48 of 56

Trisshaun.	a K.	Daniels Last Name	774°	_	Case number (if known	)
Insiders include you corporations of whic	r relatives; a h you are an for a busine	ny general partners; r officer, director, pers ss you operate as a s	elatives of any on in control, o	general partners; or owner of 20% or	partnerships of which	who was an insider? ch you are a general partner; g securities; and any managing or domestic support obligations,
Yes. List all payr	nents to an i	nsider.	Dates of payment	Total amount	Amount you still owe	Reason for this payment
Insider's Name				\$	\$	
Number Street			#*\##\################################			· ·
Ar.						
City	4400	Slete ZIP Code		 \$	\$	
Insider's Name				*	*	
Number Street	······································					
City	· · · · · · · · · · · · · · · · · · ·	State ZIP Code				
n insider?	debts guara	nteed or cosigned by		ayments or trans	fer any property o	n account of a debt that benefited
	ात्व साम्य प्रथा		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name	THE STATE OF THE S	THE STATE OF		\$	\$	
Number Street					And a second of the second of	
City		State ZIP Code	A		an menyangkan dan pangan dan pang	
Insider's Name	Advanta and and an extensive of the contract o	The state of the s		\$	\$	
Number Street		A TOTAL CONTROL OF THE CONTROL OF A THE	***************************************		1	
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## Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 49 of 56

otor 1	Trisshauna	K.	Daniels		Case numb	er (il known)	
	ursi name Mi	ide Name	Last Name				
art 4:	Idontify Lamb		<b>.</b>				
				s, and Foreclosur			
List a	ill such matters, incl	uding persor	ankruptcy, were nal injury cases, s	small claims actions, o	awsuit, court action, d livorces, collection suit	or administrative process, paternity actions, sup	eding? port or custody modificati
ang c	contract disputes.					,	
그 ^ 진 M	o es. Fill in the details						
المسب	es. Fill in the details	i <b>.</b>	Matura	of the case	Court or agenc		
			reature.	of the case	Court or agenc	У	Status of the case
(	Case title		·		Court Name		Pending
							On appeal
					Number Street		Concluded
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			1904		City	State ZIP Code	
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	Pase title				Court Name		On appeal
-					Number Street		Concluded
C	Case number				10 mg		
					City	State ZIP Code	
- 10	s. Fill in the informa	non below.		Describe the propert	<b>y</b> ,, 478, 418,	Date	Value of the property
	Creditor's Name		· · · · · · · · · · · · · · · · · · ·				\$
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	Number Street	II.		Explain what happen	ed		
	P 200 A			Property was ro			
				Property was for Property was g			
	City	Slate	ZIP Code		ttached, seized, or levi	ed.	
		A STATE OF THE PARTY	Annual Annua	Describe the property	<b>V</b>	Date	Value of the property
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	Creditor's Name					1944	
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Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 50 of 56

	Trisshauna	<u>K.</u>	Daniels	Case number	(if known)	
	s not usante	Middle Name	l.asi Name			
ithi	in 90 days before	you filed for ban	kruptcy, did any credit	tor, including a bank or financial i	institution set off any	amounte from vou
COL	unts of refuse to	make a payment	because you owed a c	lebt?	monday, set on any	amounts nom you
No						
Υe	es. Fill in the detai	ls.				
			Describe the actio	n the creditor took	Date action	
					was taken	Amount
Cre	editor's Name					
Nim	ımber Street					\$
MU	imber Street					¥ <u></u>
**********						
City	у	State ZIP Code	Last 4 digits of ac	count number: XXXX		
thin	n 1 year before yo	ou filed for bankr	uptcy, was any of your	property in the possession of an	assignee for the bene	fit of
3(316)	ors, a court-appo	inted receiver, a	custodian, or another	official?		
No						
Ye	es					
	List Certain (	ifts and Contri	butions			
thin	2 vears before v	ou filed for hank	runtov, did vou dive an	y gifts with a total value of more t	than \$600	
No	y 201010 y	ou med for banki	ruptcy, did you give an	y gots with a total value of more t	tnan \$600 per person?	
Yes	s. Fill in the details	s for each gift.				
C:	ifte with a tetal		A 15 14 11 1-			4
	er person	ie of more than \$60	0 Describe the gifts		Dates you gave the gifts	Value
			in the second se			
Pers	son to Whom You Gave	the Gift			THE PARTY AND TH	\$
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Num	nber Street					
			!		:	
City		State ZIP Code	<u></u> !		2	
Pers	son's relationship to	you				
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Gifts per	s with a total value person	of more than \$600	Describe the gifts		Dates you gave	Value
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Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 51 of 56

or 1	Trisshauna First Name	K. Middle Name	Daniels Last Name	Case number (if known)	
Witl	hin 2 years before	you filed for ba	nkruptcy, did you gi	ve any gifts or contributions with a total value of more th	an \$600 to any charity?
Ø					,
	Yes. Fill in the deta	ils for each oift o	er contribution		
		191 QG 311 g(A E	, odna ibation.		
	Gifts or contribution that total more than		Describe what	t you contributed Date you contributed	Value
		Time			
	Charity's Name	* * · · · · · · · · · · · · · · · · · ·			\$
	Onarty's Walte				
					\$
ī	Number Street				
7	City State	ZIP Code			
,	Day State	ZiP Code			
	List Certain			•	
	LIST CERTAIN	Losses			
	es. Fill in the detail  Describe the proper how the loss occurre	ty you lost and	A	nsurance coverage for the loss  Date of your loss ount that insurance has paid. List pending insurance	Value of property lost
	The second transfer of the second sec		claims on line 3	3 of Schedule A/B: Property.	18
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1					
7	List Certain P	avments or T	ransfers	en e	
	<u> </u>				
ith Si i	in 1 year before yo	u filed for bank	ruptcy, did you or a	nyone else acting on your behalf pay or transfer any prop	erty to anyone
ou e clu	de anv attornevs, h	seking bankrup ankriiptov netitio	toy or preparing a ba	ankruptcy petition? counseling agencies for services required in your bankruptcy.	
		optoy petitlo	proparais, or cital	counseling agencies for services required in your pankruptcy	
ĬN lv	lo 'es. Fill in the details				
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			Description and	d value of any property transferred Date payment	t or Amount of paymen
i	Person Who Was Paid			transfer was made	
Ĭ	Number Street				\$
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(	City	State ZIP Code	<del></del>		
		J., 000			
Ē	mail or website address				
F	erson Who Made the Pay	ment, if Not You	İ		

# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 52 of 56

		Daniels		
	First Name Middle Name Last	Name	Case number (if known)	
*419				
		Description and value of any property tran	nsferred Date payment or transfer was made	Amount of payment
	Person Who Was Paid			
				\$
	Number Street			
			Manufacture of the Control of the Co	Ъ
	City State ZIP Code			
	Email or website address			
	Person Who Made the Payment, if Not You		100	
<b>⊿</b> N ] Y	lo es. Fill in the details.			
		Description and value of any property trans	sferred Date payment or transfer was	Amount of paym
	Person Who Was Paid	<u> </u>	made	
	D SUDDOME SOURCE			¢
	Number Street			
			Andrews and indicate in the control of the control	Ψ
				\$
Vithi	City State ZIP Code n 2 years before you filed for bankrup:	tcy, did you sell, trade, or otherwise tran	usfer any property to anyone, other tha	\$n property
Vithing ransing look of the lo	n 2 years before you filed for bankrup: ferred in the ordinary course of your b de both outright transfers and transfers m at include gifts and transfers that you hav	ade as security (such as the granting of a sealready listed on this statement.	security interest or mortgage on your pro	perty).
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Vithin ransi nclud do no o o o o o o o o o o o o o o o o	n 2 years before you filed for bankrup: ferred in the ordinary course of your be de both outright transfers and transfers m of include gifts and transfers that you have courses. Fill in the details.  Person Who Received Transfer  Person's relationship to you erson Who Received Transfer	ade as security (such as the granting of a sealready listed on this statement.  Description and value of property transferred or	security interest or mortgage on your property or payments received r debts paid in exchange	perty). Date transfer

#### Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Document Page 53 of 56

X 1330 00 Trisshauna K. Daniels Debtor 1 Case number (if known) First Name Middle Name 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **₩** No Yes, Fill in the details. Description and value of the property transferred Name of trust Par (8) List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved. closing or transfer or transferred Name of Financial Institution XXXX-\_\_\_\_\_\_\_ Checking Savings Number Street Money market Brokerage City ZIP Code Other\_ Checking XXXX-Name of Financial Institution ☐ Savings Number Street Money market ☐ Brokerage Other City State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? OF THE TOP AND THE SECOND M No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? ☐ No ☐ Yes Name of Financial Institution Name Number Street Number Straet City State ZiP Code City State

ZIP Code

## Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 54 of 56

ebtor 1	Trisshauna	К,	Daniels	Ca	se number (if known)		
	First Name Mi	iddle bles Talkana (Analysis)	ast Name		- '		
22. Have :	you stored propert	ty in a storage un	it or place other than your hom	e within 1 vea	r before you filed for	hanknintov2	
<b>₩</b> No	0		,		. soloto you inca lor	ominiupley:	
LJ Ye	es. Fill in the detail	ts.					
			Who else has or had access to	o it?	Describe the content	S	Do you still have it?
					1		
i	Name of Storage Facility	1	Name		•		☐ No ☐ Yes
i	Number Street		Number Street		· ·		
•	·		CityState ZIP Code				
7	City	State ZIP Code	·~				
Part 9:	Identify Pro	perty You Hold	i or Control for Someone E	lse			
23. Do yo	ou hold or control	any property that	someone else owns? Include :	any property y	ou borrowed from, ar	re storing for,	
or ho	old in trust for som	eone.					
	o es. Fill in the detail	le					
	oot i iii iii tiid dataii	.5.	Where is the property?		Describe the property		Value
			1 1 2				1
ē	Owner's Name		-		:		S
ē	Owner's Name		- Number Street				\$
_	Owner's Name Number Stroet		- Number Street				\$
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ñ 		State ZIP Code	Number Street  City State	ZIP Code			\$
-	Number Street		***	ZIP Code		·	\$
7 2 ar : 10	Number Street  City  Give Details	About Environ	- City State	ZIP Code			\$
Par <b>: 10</b> For the p	City  Give Details  ourpose of Part 10,	the following de	- City State  nmental Information  finitions apply:				\$
For the p	City  Give Details  ourpose of Part 10, conmental law mean dous or toxic subs	the following det ns any federal, st stances, wastes,	- City State  nmental Information  finitions apply: tate, or local statute or regulation or material into the air, land, so	on concerning	er, groundwater, or o	tion, releases of other medium,	\$
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## Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 55 of 56

Name of site    Number Street    1 Trisshauna K. First Name Middle Name	Daniels Lest Name	Case number	(if known)		
No   Yes. Fill in the details.   Covernmental unit   Environmental law, if you know it   Date of not					
Ves. Fill in the details.   Governmental unit   Environmental law, if you know it   Date of not		ital unit of any release of hazardous n	naterial?		
Coveremental unit					
Number Street    City   State   ZIP Code	J Yes. Fill in the details.	Construental and			
Number Street    City   State ZIP Code		Governmental unit	Environmental lay	v, if you know it	Date of notice
Number Street   Number Street   Number Street   City   State ZIP Code					
City State ZIP Code  We you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No IYOS, Fill in the details.  Court or agency Nature of the case Status of t case title  Court Manes  Case title  Court Manes  Case title  Court Manes  Conclusion Street  Case number  City State ZIP Code  City State Z	Name of site	Governmental unit			***************************************
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we you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No I No I Yes. Fill in the details.    Court or agency					
No  Yes. Fill in the details.  Court or agency  Nature of the case  Case title.  Court Name  Court Nam		City State ZIP Co	de		
No Yes. Fill in the details.  Court or agency  Nature of the case  Case title  Court Name  Court or agency  Nature of the case  Status of to case  Pendin  On app  Number Street  City State ZIP Code  Give Details About Your Business or Connections to Any Business  Case number  City State ZIP Code  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN  EIN:  Describe the nature of the Dusiness  Employer Identification number  Do not include Social Security number or ITIN  EIN:  Describe the nature of the Dusiness  Employer Identification number  Do not include Social Security number or ITIN  EIN:  Number Street  Name of accountant or bookkeeper  Dates business existed	City State Z	IP Code			
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Court or agency   Nature of the case   Status of traces		cial or administrative proceeding unde	er any environmental la	w? Include settlements and o	orders.
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Give Details About Your Business or Connections to Any Business  thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN  EIN:		Court Name			
Give Details About Your Business or Connections to Any Business  Give Details About Your Business or Connections to Any Business  Give Details About Your Business or Connections to Any Business  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN  EIN:		Number Street			1
Give Details About Your Business or Connections to Any Business  thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN  EIN:  City State ZIP Code  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN  EIN:		Konsul Direct	•		: Conclude
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A partner in a partnership An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN  EIN:  City State ZIP Code  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN  Employer Identification number Do not include Social Security number or ITIN  Employer Identification number Do not include Social Security number or ITIN  Employer Identification number Do not include Social Security number or ITIN  EIN:  Employer Identification number Do not include Social Security number or ITIN  EIN:  Number Street  Name of accountant or bookkeeper  Dates business existed	A sole proprietor or self-en	iployed in a trade, profession, or othe lify company (LLC) or limited liability	er activity, either full-tin	ne or part-time	
An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or ITIN  EIN:		my company (sect) of mines hability	barnersub (cer.)		
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Business Name    Do not include Social Security number or ITIN	-		business.		
Number Street    Name of accountant or bookkeeper   Dates business existed		Describe the nature of the bus	siness	· •	
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Number Street  Name of accountant or bookkeeper  Dates business existed	City State ZiF	**************************************			<b></b>
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# Case 18-19646 Doc 1 Filed 07/13/18 Entered 07/13/18 11:54:01 Desc Main Document Page 56 of 56

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	Describe the nature of the business	Employer Identification number
Business Name		Do not include Social Security number or ITIN
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From
Only State Est Code		
thin 2 years before you filed for bankrup titutions, creditors, or other parties. No Yes. Fill in the details below.	stcy, did you give a financial statement to anyo	ne about your business? Include all financial
res. riii in trie detans below.	Date issued	
Name	MM / DD / YYYY	
Number Street		
City State ZIP Code		
PH Sign Below		
isyters are true and correct I understan	t of Financial Affairs and any attachments, and that making a false statement, concealing properties on the second of the second	operty, or obtaining money or property by fraud
Signature of Debtor 1  Date	Signature of Debtor 2	•
	Date tatement of Financial Affairs for Individuals Fi	ling for Bankruptcy (Official Form 107)?
No Yes		
d you pay or agree to pay someone who	is not an attorney to help you fill out bankrup	tcy forms?